

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|-------------|-----------------|
| FEE DETERMINATION | <i>8</i> | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>JP</i> | <i>1027</i> | <i>09/25/01</i> |
| RESPONSE FORMALITY REVIEW | <i>JP</i> | <i>1091</i> | <i>5/31/02</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(1 FET INSIDE)

520
 9-25-01
 58
 5/3/02